FORM D

Washington, D.C. 20549

1	Expires. April 50, 2006
٠	Estimated average burden
	hours per response16.00
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NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY Prefix Serial DATE RECEIVED

41023

1005						1	
Name of Offering (☐ che Common Stock	ck if this is an amer	ndment and name	has chan	ged, and indica	te change.)		
Filing Under (Check box(es)	that apply):	☐ Rule 504	X	Rule 505	⊠ Rule 506	Section 4(6) D ULOE
Type of Filing: 🗵 Nev	v Filing 🔲 Am	endment	_			RECEN	VED CO
A. BASIC IDEN	TIFICATION DA	ΓA				//	14
1. Enter the information re	equested about the	ssuer				Ark A	ZUU/ //
Name of Issuer (D check if GeoResources, Inc.	this is an amendme	nt and name has o	changed,	and indicate ch	ange.)	The state of the s	
Address of Executive Office 1407 West Dakota Parkway	•		. ,			one Number (Includ	ding Area Code)
Address of Principal Busine if different from Executive C		ber and Street, Ci	ty, State,	Zip Code)	Telepho	one Number (Includ	ding Area Code)
Brief Description of Busines	s		_				
Natural resources company drilling	engaged in two prin	cipal business seç	gments: a	i) oil and gas ex	ploration, develop	oment and producti	on; and b) oil and gas
Type of Business Organizati	on			<u>-</u>			PROCESSE
⊠ corporation	Iimited partne	rship, already form	red		_		
☐ business trust	☐ limited partne	rship, to be formed	l		other (ple	ase specify):	MAY 0 3 2007
		Mor	ıth	Year			MOSMONI
Actual or Estimated Date of	Incorporation or Org	anization: 1	0	5 8	⊠ Actual	☐ Estimated	FINANCIAL
Jurisdiction of Incorporation	or Organization:	(Enter two-lette	er U.S. Po	ostal Service ab	breviation for Sta	te: C	THE PERSON NAMED IN COLUMN

GENERAL INSTRUCTIONS

Jurisdiction of Incorporation or Organization:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada; FN for other foreign jurisdiction)

(Enter two-letter U.S. Postal Service abbreviation for State:

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal

- Each promoter of the issuer, if the issuer has been organized within the past five years.
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	⊠Executive Officer	⊠Director	☐ General and/or Managing Partner
Full Name (Last name first, if Jeffrey P. Vickers	individual)				
Business or Residence Addr 1407 West Dakota Parkway,			ode)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	□Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if Paul A. Krile	individual)				
Business or Residence Addre P.O. Box 329, Sioux Rapids,		Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	⊠ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if Cathy Kruse	individual)				
Business or Residence Address 1407 West Dakota Parkway,			ode)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if Connie Hval	individual)				
Business or Residence Address 1407 West Dakota Parkway,			ode)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	□Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if H. Dennis Hoffelt	individual)				
Business or Residence Addre 9421 E. Desert Lake, Sun La			ode)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	⊠ Director	☐ General and/or Managing Partner
Full Name (Last name first, if Duane Ashley	individual)				
Business or Residence Addre 910 15th Street W., Williston,			ode)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	図 Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Nick Voller	individual)				
Business or Residence Addre 222 University Avenue, Willis			ode)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	🗅 Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				-
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		
(Lise blank sheet, or conviand	d use additional c	nnies of this sheet, as ner	· vissar		

Answer also in												
2.What is the	minimum in	vestment th	at will be ac	cepted fron	n any individ	lual?					\$100.00	
											Yes	No
3.Does the offe	ering permit	joint owner	rship of a sir	ngle unit?							\boxtimes	
similar ro an asso broker o	emuneratior ciated perso r dealer. If r	n for solicita on or agent : more than fi	for each per tion of purch of a broker o ve (5) perso or dealer onl	nasers in co or dealer re ins to be list	nnection wit gistered with	h sales of so the SEC a	ecurities in t nd/or with a	he offering. state or sta	If a person to	to be listed i name of th	is e	
Full Name (Las	st name first	t, if individu	al)									
Business or Re	esidence Ad	idress (Nun	nber and Str	reet, City, S	tate, Zip Co	de)			<u> </u>		 -	
Name of Assoc	ciated Broke	er or Dealer			-							
States in Whic	h Person Lis	sted Has So	olicited or In	tends to So	licit Purchas	ers						
			vidual States		MORT BICHES	0013					All States	<u>.</u>
[AL]	[AK]	[AZ]	[AR]	-, [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[11]	[IN]	[AI]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
1 4 A T 1	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[MT]				[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
[RI]	[SC]	[SD]	[TN]	<u> ['^] .</u>								
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[RI] Full Name (Las	st name first	, if individua	al) nber and Str									
[RI] Full Name (Las Business or Re	st name first esidence Ad ciated Broke	, if individua dress (Num	al) nber and Str	eet, City, St	tate, Zip Cod	de)						
[RI] Full Name (Las Business or Re Name of Assoc	esidence Ad ciated Broke h Person Lis	dress (Num r or Dealer	al) nber and Str	eet, City, St	tate, Zip Cod	de)					All States	
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	Type of Security		ring For change		Exchanged
	Debt				
	Equity	sh	690,000 ares of non stock		
	☑ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$		\$	
	Partnership Interests	\$		\$	
	Other (Specify; units of notes and warrants)	\$		\$	
	Total	\$		\$	
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			ımber estors		Aggregate Number of Shares Exchanged
	Accredited Investors		40	\$	10,899,643
	Non-accredited Investors		9	\$	209,643
	Total (for filings under Rule 504 only)		0	\$	0
	Answer also in Appendix, Column 3, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information required for all securities sold by the issuer, to date, in offering of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.				
	Type of offering		pe of curity		Number of Shares Exchanged
	Rule 505	Comm	on Stock	\$	209,643
	Regulation A			S	0
	Rule 504			\$	0
	Total			\$	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees		×	\$	5,000
	Printing and Engraving Costs		×	\$	20,000
•••	Legal Fees		図	\$	200,000
	Accounting Fees	-	×	\$	150,000
	Engineering Fees			\$	
	Sales Commissions (specify finders' fees separately)			\$	
	Other Expenses (identify):			\$	

Amount Aiready

Aggregate

	Total		•••••	•••••	····	X	\$	375,000
C.	OFFERING PRICE, NUMBER OF INVESTORS, EX	XPENSES AND USE OF PROCE	ED	S			_	
	b. Enter the difference between the aggregate offering part of the state of the sta		No proceeds from the exchange		\$	N/A		
5.	Indicate below the amount of the adjusted gross proceeds for each of the purposes shown. If the amount for any pur check the box to the left of the estimate. The total of the gross proceeds to the issuer set forth in response to Part							
					Payments to Officers, Directors, & Affiliates			Payments to Others
	Salaries and fees			\$			s	<u> </u>
	Purchase of real estate			\$		T	\$	
	Purchase, rental or leasing and installation of machine	nery and equipment		\$			s	
	Construction or leasing of plant buildings and facilitie	95		\$			\$	
	Acquisition of other businesses (including the value that may be used in exchange for the assets or secumerger)	rities of another issue pursuant to a		\$			\$	
	Repayment of indebtedness			\$			\$	
	Advertising & Promotion			\$			s	
	Working capital			\$			\$	
	Research & Development			\$			\$	
	Column Totals			\$		70	\$	
	Total Payments Listed (column totals added)						\$	
		<u> </u>					سل	
), Fl	DERAL SIGNATURE							
onst	suer has duly caused this notice to be signed by the unders tutes an undertaking by the issuer to furnish to the U.S. Seci issuer to any non-accredited investor pursuant to paragrap	urities and Exchenge Commission, up	otice on w	e is ritte	filed under Rule en request of its s	505, taff, th	the ie in	following signatur
sue	(Print or Type)	Signature				Date April		2007
eoF	esources, Inc.	J.D. Vice		_	,			
lame	of Signer (Print or Type)	Title of Signer (Print or Type)						
effre	y P. Vickers	Chief Executive Officer	_					
TTI	NTION							

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	See Appendix, Column 5, for state response.
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFI 239.500) at such times as required by state law.
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees

establishing that these conditions have been satisfied.

The issuer has read this notification and know authorized person.	rs the contents to be true and has duly caused this notice to be sig	ned on its behalf by the undersigned duly
Issuer (Print or Type)	Signature	Date
GeoResources, Inc.	J. Dul	April 17,2007
Name of Signer (Brist or Type)	Title of Signer (Brint or Tune)	

The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of

Name of Signer (Print or Type) Title of Signer (Print or Type) Jeffrey P. Vickers Chief Executive Officer

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	investor	ccredited s in State -Item 1)	offering price offered in state (Part C-Item 1)		amount pu	f investor and rchased in State t C-Item 2)		waiver	ation of granted) -Item 1)
State	Yes	No		Number of Accredited investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA		xx	Common Stock						
со	xx		Common Stock						
ст									
DE									
DC									
FL		xx	Common Stock						
GA									
НІ									
ID									
[]]		xx	Common Stock						
IN									·
IA						!			·
KS			<u>,,_</u>						_
KY_		_							
LA		xx	Common Stock						
ME		<u> </u>						<u> </u>	
MD									
MA		_							
MI		xx	Common Stock				<u></u> ,		
MN									
MS					<u></u>				
МО									

	investor (Part B	s in State -Item 1)	offered in state (Part C-Item 1)		waiver granted) (Part E-Item 1)				
State	Yes	No		Number of Accredited investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
MΤ									
NE									
NV		xx	Common Stock						
NH									
NJ		xx	Common Stock						
NM									
NY									
NC		xx	Common Stock						
ND									
ОН									
ок									
OR									
PA					-				
RI					_				
sc									
SD									
TN									
ΤX	XX		Common Stock						
UT					-				
VT	_				_				
VA									
WA		ХХ	Common Stock						
wv							,		
WI									
MY									
PR									
234.1				<u> </u>	•		FAIG	7	